



NAME: _____
 PLAYER: _____
 CASTE: _____

CONCEPT: _____
 NATURE: _____
 ANIMA: _____

ATTRIBUTES

STRENGTH _____ OOOOO CHARISMA _____ OOOOO PERCEPTION _____ OOOOO
 DEXTERITY _____ OOOOO MANIPULATION _____ OOOOO INTELLIGENCE _____ OOOOO
 STAMINA _____ OOOOO APPEARANCE _____ OOOOO WITS _____ OOOOO

ABILITIES

JOURNEYS

ENDURANCE _____ OOOOO
 RIDE _____ OOOOO
 SAIL _____ OOOOO
 SURVIVAL _____ OOOOO
 THROWN _____ OOOOO

SERENITY

CRAFT _____ OOOOO
 DODGE _____ OOOOO
 LINGUISTICS _____ OOOOO
 PERFORMANCE _____ OOOOO
 SOCIALIZE _____ OOOOO

BATTLES

ARCHERY _____ OOOOO
 BRAWL _____ OOOOO
 MELEE _____ OOOOO
 PRESENCE _____ OOOOO
 RESISTANCE _____ OOOOO

SECRETS

INVESTIGATION _____ OOOOO
 LARCENY _____ OOOOO
 LORE _____ OOOOO
 OCCULT _____ OOOOO
 STEALTH _____ OOOOO

ENDINGS

ATHLETICS _____ OOOOO
 AWARENESS _____ OOOOO
 BUREAUCRACY _____ OOOOO
 MARTIAL ARTS _____ OOOOO
 MEDICINE _____ OOOOO

SPECIALTIES

_____ OOOOO
 _____ OOOOO
 _____ OOOOO
 _____ OOOOO
 _____ OOOOO

ADVANTAGES

BACKGROUNDS

 _____ OOOOO
 _____ OOOOO
 _____ OOOOO
 _____ OOOOO
 _____ OOOOO
 _____ OOOOO
 _____ OOOOO

CHARMS

NAME	COST	NAME	COST
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

COLLEGES

 _____ OOOOO
 _____ OOOOO
 _____ OOOOO
 _____ OOOOO
 _____ OOOOO

WILLPOWER

○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○

VIRTUES

COMPASSION ● ○ ○ ○ ○ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	TEMPERANCE ● ○ ○ ○ ○ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
CONVICTION ● ○ ○ ○ ○ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	VALOR ● ○ ○ ○ ○ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

WEAPONS

HEALTH

SOAK
 B _____ L _____ A _____

ESSENCE

● ○ ○ ○ ○ ○ ○
 PERSONAL _____ | _____
 PERIPHERAL _____ | _____
 COMMITTED _____

ANIMA

-0	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
-2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
-4					<input type="checkbox"/>
INCAPACITATED					<input type="checkbox"/>

PARADOX

EXPERIENCE
